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CONFIRMATION NO. 6091

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|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------|
| SERIAL NUMBER 10/036,606 | FILING DATE 12/21/2001 RULE | CLASS 709 | GROUP ART UNIT 2155 | ATTORNEY DOCKET NO. 782.10 |
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APPLICANTS

Douglas C. Osburn III, League City, TX;

** CONTINUING DATA *****

This application is a CIP of 09/826,578 04/05/2001

Yes β/β

** FOREIGN APPLICATIONS *****

No β/β

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 02/04/2002

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|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY TX | SHEETS DRAWING 8 | TOTAL CLAIMS 34 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u>Bhusat j Busat</u> Examiner's Signature Initials | | | | |

ADDRESS

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TITLE

Enterprise server for scada system

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|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED 496 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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